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| <b>TRANSMITTAL LETTER TO THE UNITED STATES<br/>DESIGNATED/ELECTED OFFICE (DO/EO/US)<br/>CONCERNING A SUBMISSION UNDER 35 U.S.C. 371</b>  |  | ATTORNEY'S DOCKET NO.  |
|  |  | U.S. APPLICATION NO. (If known, see 37 C.F.R. 1.5)<br><b>10/579955</b> |
| INTERNATIONAL APPLICATION NO.<br>PCT/EP2004/013239   | INTERNATIONAL FILING DATE<br>November 22, 2004 | PRIORITY DATE CLAIMED<br>FR 0313686 filed November 21, 2003            |
| TITLE OF INVENTION<br><b>UTILITY DEVICE FOR A CONTAINER OF LIQUID MATTER</b>   |  |  |
| APPLICANT(S) FOR DO/EO/US<br><b>Jean-Francois Bedon</b>  |  |  |
| Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:  |  |  |
| 1. <input checked="" type="checkbox"/> This is a FIRST submission of items concerning a filing under 35 U.S.C. 371<br>2. <input type="checkbox"/> This is a SECOND or SUBSEQUENT submission of items concerning a filing under 35 U.S.C. 371<br>3. <input type="checkbox"/> This express request to begin national examination procedures (35 U.S.C. 371(f)). The submission must include items (5), (6), (9), and (21) indicated below.<br>4. <input checked="" type="checkbox"/> The US has been elected (Article 31).<br>5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371(c)(2)).<br>a. <input checked="" type="checkbox"/> is transmitted herewith (required only if not transmitted by the International Bureau).<br>b. <input type="checkbox"/> has been transmitted by the International Bureau.<br>c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US).<br>6. <input type="checkbox"/> An English translation of the International Application into English (35 U.S.C. 371(c)(2)).<br>a. <input type="checkbox"/> is attached hereto.<br>b. <input type="checkbox"/> has been previously submitted under 35 U.S.C. 154(d)(4).<br>7. <input type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3)).<br>a. <input type="checkbox"/> are transmitted herewith (required only if not transmitted by the International Bureau).<br>b. <input type="checkbox"/> have been transmitted by the International Bureau.<br>c. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired.<br>d. <input type="checkbox"/> have not been made and will not be made.<br>8. <input type="checkbox"/> An English translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)).<br>9. <input type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4)).<br>10. <input type="checkbox"/> An English translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)) and/or amendments under Article 34. |  |  |
| <b>Items 11 to 20 Below concern other document(s) or information included:</b><br>11. <input type="checkbox"/> An Information Disclosure Statement under 37 CFR 1.97 and 1.98.<br>12. <input type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.<br>13. <input type="checkbox"/> A preliminary amendment.<br>14. <input type="checkbox"/> An Application Data Sheet under 37 CFR 1.76.<br>15. <input type="checkbox"/> A substitute specification.<br>16. <input type="checkbox"/> A power of attorney and/or change of address letter.<br>17. <input type="checkbox"/> A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 CFR 1.821-1.825.<br>18. <input type="checkbox"/> A second copy of the published international application under 35 U.S.C. 154(d)(4).<br>19. <input type="checkbox"/> A second copy of the English language translation of the international application under 35 U.S.C. 154(d)(4).<br>20. <input checked="" type="checkbox"/> Other items or information: Return Post card.  |  |  |

SEND COMPLETED FORM TO: Mail Stop PCT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

AP20 Rec'd PCT/PTO 22 MAY 2006

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| U.S. APPLICATION NO. (If known, see 37 C.F.R. 1.50)<br><div style="font-size: 1.5em; font-weight: bold; margin-top: 5px;">10/570955</div> | INTERNATIONAL APPLICATION NO.<br>PCT/EP2004/013239 | ATTORNEY'S DOCKET NO. |
|---|--|-----------------------|

| The following fees are submitted:<br><br>21. <input checked="" type="checkbox"/> Basic national fee (37 CFR 1.492(a)) .....\$150<br><br>22. <input type="checkbox"/> Examination fee (37 CFR 1.492(c))<br>If International preliminary report prepared by ISA/US or the examination report prepared by IPEA/US indicates all claims satisfy provisions of PCT Article 33(1)-(4) .....\$0<br>All other situations .....\$200<br>23. <input type="checkbox"/> Search Fee (37 CFR 1.492(b))<br>If the written opinion of the ISA/US or the International preliminary examination report prepared by IPEA/US indicates all claims satisfy provisions of PCT Article 33(1)-(4) .....\$0<br>Search fee (37 CFR 1.445(a)(2)) has been paid on the international application to the USPTO as an<br>International Searching Authority .....\$100<br>International Search Report prepared and provided to the Office .....\$400<br>All other situations .....\$500<br><br><div style="text-align: right;">TOTAL OF 21, 22 and 23 = <span style="float: right;">\$150.00</span></div> <input type="checkbox"/> Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$250 for each additional 50 sheets of paper or fraction thereof.<br>Surcharge of \$130.00 for furnishing the oath or declaration later than <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(e)).<br><table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <th style="width: 20%;">Claims</th> <th style="width: 20%;">Number Filed</th> <th style="width: 20%;">Number Extra</th> <th style="width: 20%;">Rate</th> <th style="width: 20%;"></th> </tr> <tr> <td>Total Claims</td> <td>- 20 =</td> <td>0</td> <td>x \$ 50.00</td> <td>\$0.00</td> </tr> <tr> <td>Independent Claims</td> <td>- 3 =</td> <td></td> <td>x \$ 200.00</td> <td>\$0.00</td> </tr> <tr> <td colspan="3">Multiple dependent claim(s) if Applicable)</td> <td>+ \$360.00</td> <td>\$0.00</td> </tr> <tr> <td colspan="4" style="text-align: right;">TOTAL OF ABOVE CALCUATIONS =</td> <td>\$</td> </tr> </table> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2.<br><div style="text-align: right;">SUBTOTAL = \$</div> Processing fee of \$130.00 for furnishing the English translation later than the <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(f)).<br><div style="text-align: right;">TOTAL NATIONAL FEE= \$150</div> Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31), \$40.00 per property +<br><div style="text-align: right;">TOTAL FEES ENCLOSED= \$150</div> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 60%;">Amount to be refunded</td> <td style="width: 40%;">\$</td> </tr> <tr> <td>charged</td> <td>\$</td> </tr> </table> | Claims       | Number Filed | Number Extra | Rate   |  | Total Claims | - 20 = | 0 | x \$ 50.00 | \$0.00 | Independent Claims | - 3 = |  | x \$ 200.00 | \$0.00 | Multiple dependent claim(s) if Applicable) |  |  | + \$360.00 | \$0.00 | TOTAL OF ABOVE CALCUATIONS = |  |  |  | \$ | Amount to be refunded | \$ | charged | \$ | <div style="text-align: center; font-weight: bold; margin-bottom: 10px;">CALCULATIONS</div> <div style="text-align: center; font-weight: bold; margin-bottom: 10px;">PTO USE ONLY</div> |
|---|--------------|--------------|--------------|--------|--|--------------|--------|---|------------|--------|--------------------|-------|--|-------------|--------|--|--|--|------------|--------|------------------------------|--|--|--|----|-----------------------|----|---------|----|---|
| Claims  | Number Filed | Number Extra | Rate         |        |  |              |        |   |            |        |                    |       |  |             |        |  |  |  |            |        |                              |  |  |  |    |                       |    |         |    |   |
| Total Claims  | - 20 =       | 0            | x \$ 50.00   | \$0.00 |  |              |        |   |            |        |                    |       |  |             |        |  |  |  |            |        |                              |  |  |  |    |                       |    |         |    |   |
| Independent Claims  | - 3 =        |              | x \$ 200.00  | \$0.00 |  |              |        |   |            |        |                    |       |  |             |        |  |  |  |            |        |                              |  |  |  |    |                       |    |         |    |   |
| Multiple dependent claim(s) if Applicable)  |              |              | + \$360.00   | \$0.00 |  |              |        |   |            |        |                    |       |  |             |        |  |  |  |            |        |                              |  |  |  |    |                       |    |         |    |   |
| TOTAL OF ABOVE CALCUATIONS =  |              |              |              | \$     |  |              |        |   |            |        |                    |       |  |             |        |  |  |  |            |        |                              |  |  |  |    |                       |    |         |    |   |
| Amount to be refunded   | \$           |              |              |        |  |              |        |   |            |        |                    |       |  |             |        |  |  |  |            |        |                              |  |  |  |    |                       |    |         |    |   |
| charged   | \$           |              |              |        |  |              |        |   |            |        |                    |       |  |             |        |  |  |  |            |        |                              |  |  |  |    |                       |    |         |    |   |


a. ☐ A check in the amount of \$\_\_\_\_\_ to cover the above fees is enclosed.

b. ☒ Please charge my Deposit Account No. 23-1925 in the amount of \$ 150.00 to cover the above fees. A duplicate copy of this sheet is enclosed.

c. ☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 23-1925. A duplicate copy of this sheet is enclosed.

d. ☐ Fees are to be charged to a credit card. **WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status.

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| Send all correspondence to the address associated with<br>Customer No: 00757 - Brinks Hofer Gilson Lione | <div style="text-align: center; font-size: 1.5em; font-family: cursive; margin-bottom: 10px;">  </div> <div style="border: 1px solid black; padding: 5px;"> <div style="display: flex; justify-content: space-between;"> <span>Signature</span> <span></span> </div> <div style="display: flex; justify-content: space-between;"> <span>Name</span> <span>G. Peter Nichols</span> </div> <div style="display: flex; justify-content: space-between;"> <span>Registration Number</span> <span>34,401</span> </div> </div> |
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